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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	t .	ATTORNEY DOC	KET NO.	CONFIRMATION NO.	
10/759,012	01/20/2004		Shinji Hirano		118237		6830	
ITLE OF INVENTION: METHOD OF MANUFACTURING DISPLAY DEVICE HAVING COLUMNAR SPACERS								
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0 9/05/26	\$1 37 AUONDAF2 000	700 300117 107	10/12/2007 59012	
EXAMINER		ART UNIT	CLASS-SUBCLASS	91 FC:1501			1400.00 OP	
WILLIAMS, JOSEPH L		2879	445-066000	02 FC:1504			300.00 OP	
CFR 1.363).	ence address or indicatio		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a sing registered attorney or 2 registered patent att listed, no name will be	of a single firm (having as a member a member a mey or agent) and the names of up to atent attorneys or agents. If no name is e will be printed.				
. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
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KAWASAKI MIC	ROELECTRONICS	, INC.	CHIBA, JAPA	N .				
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government								
a. The following fcc(s) are submitted:  4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)								
Issue Fee		*** <b>1</b> 0	A check is enclosed. check no. 196457 (\$1,700)					
Advance Order -	No small entity discount	permitted)	<ul> <li>□ Payment by credit card. Form PTO-2038 is attached.</li> <li>□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).</li> </ul>					
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NOTE: The Issue Fee an	nd Publication/Fee (if recreased a fishe/United Se	uired) will not be accepted					assignce or other party in	
Authorized Signature Date September 4, 2007								
.Typed or printed nam	ne Mario A. Co	stantino	<del></del>	Registration No. 33,565				
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